

ASSESSING OFFICIALS' RESPONSE TO EXEMPTIONS/TAX CREDITS/DEFERRAL APPLICATION

Property for which Exemption/Tax Credit/Deferral is claimed:

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|--|--|--|--------------------------------------|--|--|--|
| STEP 1 NAME AND ADDRESS | PROPERTY OWNER'S LAST NAME | | FIRST NAME | | INITIAL | |
| | PROPERTY OWNER'S LAST NAME | | FIRST NAME | | INITIAL | |
| | MAILING ADDRESS | | | | | |
| | CITY/TOWN | | STATE | | ZIP CODE | |
| | CITY/TOWN TAX MAP # | | BLOCK # | | LOT # | |
| STEP 2 EXEMPTIONS/TAX CREDITS/DEFERRAL | VETERANS' TAX CREDIT | | | | | |
| | <input type="checkbox"/> | Veterans' Tax Credit \$50 minimum (to \$500) | | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| | <input type="checkbox"/> | Service Connected Total & Permanent Disability \$700 minimum (to \$2,000) | | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| | <input type="checkbox"/> | Surviving Spouse of Veteran Who Was Killed or Who Died on Active Duty \$700 minimum (to \$2,000) | | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| | VETERAN'S EXEMPTION | | | | | |
| | <input type="checkbox"/> | Total Exemption | <input type="checkbox"/> (a) Veteran | <input type="checkbox"/> (b) Surviving Spouse | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| | OTHER EXEMPTIONS | | | | | |
| | <input type="checkbox"/> | Elderly Exemption | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| | <input type="checkbox"/> | Disabled Exemption | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| | <input type="checkbox"/> | Improvements to Assist the Deaf | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied |
| <input type="checkbox"/> | Improvements to Assist Person with Disabilities | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | |
| <input type="checkbox"/> | Blind Exemption | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | |
| <input type="checkbox"/> | Deaf Exemption | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | |
| <input type="checkbox"/> | Solar Energy Systems Exemption | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | |
| <input type="checkbox"/> | Woodheating Energy Systems Exemption | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | |
| <input type="checkbox"/> | Wind-Powered Energy Systems Exemption | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | |
| For credits and exemptions: This page must be returned to the property owner after approval or denial on or before July 1st prior to the date of Notice of Tax under RSA 72:1-d by first class mail. (RSA 72:34,IV) | | | | | | |
| <input type="checkbox"/> | Deferral | Amount \$ | _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | <input type="checkbox"/> Granted <input type="checkbox"/> Denied | |
| For Deferrals: This page must be returned to the property owner after approval or denial on or before July 1st following the date of Notice of Tax under RSA 72:1-d by first class mail. (RSA 72:34,IV) | | | | | | |
| STEP 3 COMMENTS/ NOTES | Municipal Comments/Notes | | | | | |
| STEP 4 SIGNATURES | Selectmen/Assessor(s) Printed Name | Signature of Selectmen/Assessor(s) of Approval in ink | | | Date | |
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| APPEAL PROCEDURE | If an application for a property tax exemption or tax credit is denied, an applicant may appeal in writing on or before September 1st following the date of notice of tax under RSA 72:1-d to the New Hampshire Board of Tax and Land Appeals (BTLA) or to the Superior Court. Example: If you were denied an exemption from your 2005 property taxes, you have until September 1, 2006, to appeal. Forms for appealing to the BTLA may be obtained from the NH BTLA, 107 Pleasant Street, Concord, NH 03301, their web site at www.nh.gov/btla or by calling (603) 271-2578. Be sure to specify EXEMPTION APPEAL . | | | | | |

PROPERTY OWNER'S NAME

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TAX MAP/BLOCK/LOT

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
**ASSESSING OFFICIALS RESPONSE TO EXEMPTIONS/TAX CREDIT
DEFERRAL APPLICATION**

LINE-BY-LINE INSTRUCTIONS

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| STEP 1 NAME & ADDRESS | Please type or print the property owner(s) name and address in the spaces provided. Also, enter the Tax Map, Block and Lot numbers of the property for which the Exemption/Tax Credit/Deferral is claimed. |
| STEP 2 CREDITS/ EXEMPTIONS /DEFERRAL | Check the Credits/Exemptions/Deferral box(s) which apply to property listed above. Check the box(s) Granted or Denied which apply. Place the amount of Exemption/Credit/Deferral which was granted or denied. Place the date the Exemption/Credit/Deferral was granted or denied. |
| STEP 3 COM- MENTS/ NOTES | Optional space to place any notes or comments which the applicant should be made aware of. |
| STEP 4 SIGNATURES | Selectmen or Assessor must print and sign their name in ink and date the form. |